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**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:

**Karin Sabine Von Glinski, M.D.
Kaiser Permanente Orthopedics
1425 South Main Street
Walnut Creek, CA 94796**

**Physician's and Surgeon's
Certificate No. G 77578**

Case No. 12-2013-235563

**AGREEMENT FOR
SURRENDER OF LICENSE**

Respondent.

TO ALL PARTIES:

IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-entitled proceedings, that the following matters are true:

1. Complainant, Kimberly Kirchmeyer, is the Executive Director of the Medical Board of California, Department of Consumer Affairs ("Board").
2. Karin Sabine Von Glinski, M.D., ("Respondent") has carefully read and fully understands the effect of this Agreement.
3. Respondent understands that by signing this Agreement she is enabling the Board to issue this order accepting the surrender of license without further process. Respondent understands and agrees that Board staff and counsel for complainant may communicate directly with the Board regarding this Agreement, without notice to or participation by Respondent. The Board will not be disqualified from further action in this matter by virtue of its consideration of this Agreement.

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1 4. Respondent acknowledges there is current disciplinary action against her
2 license, that on August 16, 2016, an Accusation was filed against her and on June 9, 2017,
3 a Decision was rendered wherein her license was revoked, with the revocation stayed, and
4 placed on five years' probation with various standard terms and conditions.

5 5. The current disciplinary action provides in pertinent part, "Following the
6 effective date of this Decision, if Respondent ceases practicing due to retirement or health
7 reasons or is otherwise unable to satisfy the terms and conditions of probation, Respondent
8 may request to surrender his or her license." (Condition #15).

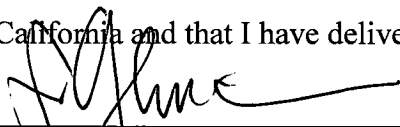
9 6. Upon acceptance of the Agreement by the Board, Respondent understands
10 she will no longer be permitted to practice as a physician and surgeon in California, and
11 also agrees to surrender her wallet certificate, wall license and D.E.A. Certificate(s).

12 7. Respondent fully understands and agrees that if Respondent ever files an
13 application for relicensure or reinstatement in the State of California, the Board shall treat
14 it as a Petition for Reinstatement of a revoked license in effect at the time the Petition is
15 filed. In addition, any Medical Board Investigation Report(s), including all referenced
16 documents and other exhibits, upon which the Board is predicated, and any such
17 Investigation Report(s), attachments, and other exhibits, that may be generated subsequent
18 to the filing of this Agreement for Surrender of License, shall be admissible as direct
19 evidence, and any time-based defenses, such as laches or any applicable statute of
20 limitations, shall be waived when the Board determines whether to grant or deny the
21 Petition.
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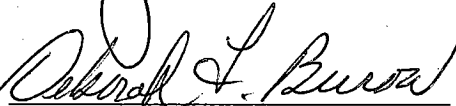
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ACCEPTANCE

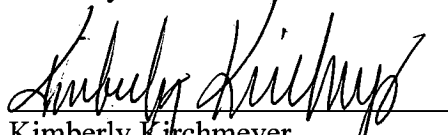
I, Karin Sabine Von Glinski, M.D., have carefully read the above Agreement and enter into it freely and voluntarily, with the optional advice of counsel, and with full knowledge of its force and effect, do hereby surrender Physician's and Surgeon's Certificate No. G 77578, to the Medical Board of California for its acceptance. By signing this Agreement for Surrender of License, I recognize that upon its formal acceptance by the Board, I will lose all rights and privileges to practice as a Physician and Surgeon in the State of California and that I have delivered to the Board my wallet certificate and wall license.


Karin Sabine Von Glinski, M.D.

10/3/2017
Date


Attorney or Witness

10/3/17
Date


Kimberly Kirchmeyer
Executive Director
Medical Board of California

October 10, 2017
Date

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